



## EXPANDING REPRODUCTIVE HEALTH AND FAMILY PLANNING

### Background

East Africa faces considerable challenges in family planning and reproductive health (FP/RH). The region has countries with the highest maternal mortality rates in the world, with many reporting over 500 deaths per 100,000 live births. The region also shows slow contraceptive use (with a regional average of 20%). Average family size is high and most women have between five and six children in their lifetime. As a result of a large proportion of the target population having unmet needs in family planning, many unintended pregnancies and unsafe deliveries impeded progress in meeting Millennium Development and FP/RH goals.

In spite of these challenges, several countries are showing progress. For example, the contraceptive prevalence rate (CPR) increased from 12% (2006) to 56% (current year) in Rwanda as a result of community-based service delivery, initiation of a national health insurance scheme, and a high level of political commitment.

The USAID/East Africa (USAID/EA) regional FP/RH program supports the region to increase access to quality information and services through:

- Promoting advocacy, policy review and best practices to ensure quality FP/RH services
- Strengthening the capacity of African institutions to improve the quality of FP/RH services
- Delivering FP/RH services to vulnerable and marginalized populations, and in post-conflict situations
- Supporting FP/RH service integration with other programs including HIV/AIDS and Maternal and Child Health; and
- Providing technical support to USAID's bilateral missions and limited presence countries (Burundi, Djibouti and Somalia) to increase access to family planning.

### Particular Initiatives

**Policies for Gender-Based Violence, Child Sexual Abuse and Fistula:** USAID/EA's partner, the East, Central and Southern Africa Health Community (ECSA), has worked with national Health Ministers to address the escalating regional crises associated with Gender Based Violence (GBV). In 2010, ECSA completed a regional prototype policy on GBV and child sexual abuse and a model fistula policy. These policies provide countries with a guidebook to operationalize service delivery for victims of GBV and fistula. ECSA is seeking support for implementation of these policies through dialogue with Health Ministers at the annual ECSA Health Ministers' conference. ECSA will work with member states to adopt these policies.

**Delivering Services in Post-Conflict Situations:** USAID/EA's family planning program supports innovations in family planning program design and implementation to reach internally displaced populations (IDPs) in Burundi and Eastern DRC. IDPs typically encounter many barriers that prevent them from accessing health and family planning services. The program is testing FP service delivery models that can be packaged to deliver FP/RH services in different phases of crisis. The program uses specially trained mobile units, community-based distribution of contraceptives (including injectables), post-exposure prophylaxis (including emergency contraception), and addresses sexual and gender based violence through community-based

approaches and advocacy. To date, 71 community based distributors have been trained in the DRC and are currently providing Depo-Provera injectable contraceptive to women in the communities.

**Convening Partners for Best Practices:** Since 2010, USAID/EA has hosted several regional family planning meetings for country teams from East, South and West Africa. These meetings provide a forum for sharing best practices to increase access to family planning. Based on this sharing, country teams develop ideas for action. It is expected that some of these ideas will be taken up for implementation by USAID bilateral missions and national Ministries of Health.